

UNEMPLOYED BURSARY APPLICATION

No.	Available Fields of Study	Please Tick the relevant field applying for
1	LLB	
2	Paralegal Studies	
3	Security Management	
4	Clinical Social Work	
5	Nursing	
6	Pharmacy	
7	Psychology	
8	IT Related Programmes	
9	Any other Occupation listed in the National List of Occupations in High Demand 2020.	

IT IS CRITICAL THAT THE PERSON APPLYING IS ALREADY STUDYING OR HAS BEEN ACCEPTED FOR STUDY AT A PREFERRED INSTITUTE

SASSETA BURSARY FUND 2022/2023

INSTRUCTIONS

- 1. Read carefully before completing, signing or submitting this form
- 2. Application form to be completed in full. DO NOT leave any blank spaces, all the information on the form is required in deciding whether or not the application is approved for funding.
- 3. Complete in block letters
- 4. Ensure that this form is duly signed
- 5. Attach ALL of the following documents REQUIRED
 - 5.1 Certified copy of ID (not older than 6 months)
 - 5.2 Certified copy of Matric / Senior Certificate or the Statement of Results or other highest qualification.
 - 5.3 Proof of Registration at a South African University for the 2022 academic year
 - 5.4 Certified copy of the learner's parent or guardian ID.
 - 5.5 **Proof of Income for parent(s) or guardian (Should parent be unemployed,** please submit affidavit by the parent declaring their employment status.)

DETAILS OF INSTITUTE				
Type of Institute (Please tick)	Public TVET			
**NB: SASSETA will only fund a private institution should the course being studied is not offered at any of the public institutions	Public University			
	Universities of Technology			
Name of Institute				
Does It Address The Scarce Skills In The SASSETA SSP as Found on the Website				
Name of Qualification (e.g. Masters, Honours, Degree or Diploma)				
Field of Study (e.g. Engineering, Tourism, IT)				
Level of Study (Year1, Semester 1)				
Student number				

PERSONAL DETAILS								
Title :Mr / Miss/ Mrs								
Surname								
First Names								
Identity Number								
Date of birth (d:m:y)								
Place of birth								
SA Citizen	Yes	No		If no	ot, please spec	ifv		
Gender						,		
		F						
Race (please tick)	African	Coloured		Indi	an		White	
Municipality				Urbar	n		Rural	
Geographic	KwaZul	Eastern	Wester	n	Limpopo	N	Ipumalanga	
location(please tick)	u Natal	Cape	Cape					
	North	Northern	Gauten	g	Free State			
	West	Cape						
Residential Address								
	Code:							
Postal Address (if different								
from above)								
	Code:							
Contact Details	Home Tel Number:							
	Cellphone							
	Fax Numb							
	E-mail Ado	dress:						
Have you been found guilty	Yes	No	if yes, please	spec	ify the nature of	rotten	ce	
of a criminal offence?								
Please provide details of any	/ / disabilitia	s or impairm	ents or specie	al lear	ning requirem	ente	VOLI MAV have	25
Please provide details of any disabilities or impairments or special learning requirements you may have as per the categories provided (Please mark with X)								
Disability	Yes			No				

Physically Disability	
Visual Disability	
Hearing Disability	
Mental Disability	
Intellectual Disability	
Psychiatric Disability	
Multiple Disability	
Impairments	
Special Learning	
Requirements	
Please provide your total	·
household income	
Home Language	

HIGH SCHOOL RESULTS (Attach certified copy of matric results or latest Grade 12 results)					
Name of school:					
Subjects(List them below)		Marks			
	Contact Details and Address of high school :				
Contact Person:					
Contact Number					
Address of High School:					
Street Name					
suburb					
Province					
Postal Code					

Please state other sources of funding (Tick)					
Loan	Yes	No			
If yes with whom?					
Other Bursary Schemes	Yes	No			
If yes with whom?					
Please attach proof of such loan/ bursary scheme as indicated above.					

DETAILS ABOUT PARENT(S) / GUARDIAN / NEXT OF KIN					
	Father	Mother	Guardian		
Surname					

First names		
Residential address		
Postal address		
Contact telephone numbers		
Employer		
E-mail		

DECLARATION

I hereby declare that **ALL** the information provided in this application form is complete and correct. I understand and acknowledge that if any of the information provided in this application form is found to be incomplete and/or incorrect, my application will be disqualified.

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT/ GUARDIAN/ NEXT OF KIN

DATE

DATE

Application Check List Supporting Documents

Please Ensure That You Have Attached the Following Supporting Documents:

Item	Yes	No
Certified copy of the applicant / learner's ID (not older than 6 months)		
Certified copy of Matric / Senior Certificate or the Statement of Results or other highest qualification.		
Proof of Registration at a South African University for the 2022 academic year		
Certified copy of the learner's parent or guardian ID.		
Proof of Income for parent(s) or guardian (Should parent be unemployed,please submit affidavit by the parent declaring their employent status.)		